



Application for Employment

Fairfax County Fire and Rescue Department
Recruitment Section, 6th Floor
4100 Chain Bridge Road
Fairfax, VA 22030
Telephone: (703) 246-3939



Email: fire.recruitment@fairfaxcounty.gov

Website: www.fairfaxcounty.gov/fire

Job applied for: Firefighter/EMT or Firefighter/Paramedic		Announcement Number: 06-9015	
<u>Minimum Qualification</u> <ul style="list-style-type: none">At least 19 years of age (no maximum)High School Diploma or G.E.DValid Driver's License		<u>Application Process</u> <ul style="list-style-type: none">Written ExamCandidate Physical Abilities TestPolygraph EvaluationMedical ExaminationPsychological Profile/Uniform Fitting	
<i>Note: Illegal drug use during the last twelve months, a DUI conviction since January 2003, two or more moving traffic violations during the last twelve months will disqualify you from further consideration from employment.</i>			
Name: Last, First, Middle		Date of Birth:	
Mailing Address: Street Apt. #		City State Zip Code	
Home:	Work:	Cell:	
Social Security Number:		Email Address:	
All questions are to be answered completely.			
Have you ever applied for the position of Firefighter/EMT or Firefighter/Paramedic with Fairfax County?		Yes	No
Are you legally able to work in the U.S?		Yes	No
Are you 19 years of age or older?		Yes	No
Do you have a High School Diploma or G.E.D?		Yes	No
Are you fluent in another language other than English?		Yes	No
If so, what language(s): _____			
Do you possess any of the following certifications?		Yes	No
<input type="checkbox"/> NREMT-Paramedic <input type="checkbox"/> Virginia EMT-Intermediate Expiration date: _____			
<input type="checkbox"/> NREMT-Intermediate/99 <input type="checkbox"/> Virginia EMT-Paramedic			
Do you possess a valid Driver's License, excluding provisional and Learner's Permit?		Yes	No
State and license number (must provide): _____			

Have you been charged with a traffic infraction in the last twelve months? (Include moving violations, accidents, traffic charges, and omit parking tickets) If yes, how many and date(s): _____	Yes	No
Has your Driver's License been suspended or restricted within the last twelve months? If yes, must provide reinstatement date(s): _____	Yes	No
Have you ever been convicted or found guilty of the following?		
▪ Reckless Driving Date(s): _____	Yes	No
▪ Driving Under the Influence Date(s): _____	Yes	No
▪ Hit and Run Date(s): _____	Yes	No
Have you ever been assigned to an alcohol safety action or driver alcohol rehabilitation program (ASAP)? If yes, date(s): _____	Yes	No
Have you ever been charged with or been convicted of a misdemeanor or felony? Are you currently under any terms or conditions? If yes, explain the charge(s), date(s) and verdict(s): _____	Yes	No
Have you ever used any illegal drugs in the past twelve months? If yes, date(s): _____	Yes	No
Have you ever sold prescription or any illegal drugs? If yes, date(s): _____	Yes	No
How did you hear about us? <input type="checkbox"/> <i>Fairfax County Web Site</i> <input type="checkbox"/> <i>Referral-County Employee</i> <input type="checkbox"/> <i>Job Fair</i> _____ <input type="checkbox"/> <i>Newspaper:</i> _____ <input type="checkbox"/> <i>Other Source(s):</i> _____		

I hereby certify that the information provided in this application is accurate and true to the best of my knowledge. I understand that any inaccurate, untruthful, or misleading statement(s) will be grounds for my disqualification from the application process. All dates are considered from the date the application is signed.

Name (Sign or Type)

Date

Please notify the Recruitment Section should you need any special accommodations during the application process. The Fairfax County Fire and Rescue Department is an Equal Opportunity/Affirmative Action Employer.

THIS SECTION IS VOLUNTARY

Please check the box which describes your sex and ethnic origin. Check only one box. The Federal Equal Employment Opportunity Commission defines ethnic origin as follows:

- ☐ A. Male-White
- ☐ B. Male-Black
- ☐ C. Male-Hispanic/Latino
- ☐ D. Male-American Indian/Alaskan Native
- ☐ E. Male-Asian/Pacific Islander
- ☐ G. Female-White
- ☐ H. Female-Black
- ☐ I. Female-Hispanic/Latino
- ☐ J. Female-American Indian/Alaskan Native
- ☐ K. Female-Asian/Pacific Islander

“White” (not of Hispanic origin) all persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

“Black” (not of Hispanic origin) all persons having origins in any of the black racial groups of Africa.

“Hispanic/Latino” all persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.

“American Indian or Alaskan Native” all persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal or community recognition.

“Asian or Pacific Islander” all persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.